



MOBILE HOME REAL ESTATE EXCISE TAX AFFIDAVIT

Submit to County Treasurer of the county in which property is located.

Chapter 82.45 RCW Chapter 458-61A WAC

This form is your receipt when stamped by cashier.

FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

PLEASE TYPE OR PRINT INCOMPLETE AFFIDAVITS WILL NOT BE ACCEPTED

REGISTERED OWNER Name: Richard D. Stover, Street: 1213 16th Avenue, City: Clarkston, WA, Zip Code: 99403

NEW REGISTERED OWNER Name: Richard D. Stover, Street: 1265 Elm #15, City: Clarkston, WA, Zip Code: 99403

LOCATION OF MOBILE HOME Name: 1265 Elm ST, Street: ~~1213 16th Ave~~ #15, City: State: Zip Code:

LEGAL OWNER Name: Street: City: State: Zip Code:

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 50041800300010150 LIST ASSESSED VALUE(S): \$ 3600

REAL PROPERTY PARCEL or ACCOUNT NO. LIST ASSESSED VALUE(S): \$

Table with columns: MAKE, YEAR, MODEL, SIZE, SERIAL NO. or I.D., REVENUE TAX CODE NO. (e.g., Marlette, 69, Goss/12, H1226ORKK, 80976)

Date of Sale: 6/16/14, Taxable Sale Price: \$1,000.00, Excise Tax: \$12.80, Delinquent Interest: \$2.50, Total Due: \$20.30

AFFIDAVIT: I certify under penalty of perjury... Signature of Grantor/Agent: Judy R. Ridge, Name (print): Judy R. Ridge, Date and Place of Signing: 6-16-14

Signature of Grantee/Agent: Richard D. Stover, Name (print): Richard D. Stover, Date & Place of Signing: 6-17-14

TREASURER'S CERTIFICATE: I hereby certify that property taxes due Asotin County on the mobile home described hereon have been paid to and including the year 2014

If, in selling (or otherwise transferring ownership of) a mobile home which possesses a tax lien, the seller does not inform the buyer (new owner) of such a lien, the seller is guilty of deliberate deception as it applies to Fraud and/or Theft as defined in Title 9 and 9A RCW

THIS SPACE - TREASURER'S USE ONLY

cash HS REV 84 0003 (12/27/06)

PAID JUN 17 2014 ASOTIN COUNTY TREASURER

17574 COUNTY TREASURER

STATE OF WASHINGTON VEHICLE CERTIFICATE OF TITLE

TITLE NUMBER
9633702504

LICENSE NUMBER %46134	DATE OF APPLICATION 12/02/96	MODEL YEAR 1969	MAKE MARLE	POWER-USE MOB	SERIES & BODY STYLE 60SS/12
VEHICLE IDENTIFICATION NUMBER (VIN) H12260RKK80976		FLEET EQUIP. NUMBER	SCALE WT.	MILEAGE 000000	ODOMETER CODE
COMMENTS - BRANDS 7125 69			EXEMPT ODOMETER DISCLOSURE		
				PRIOR TITLE STATE WA	PRIOR TITLE NUMBER 9626402603

REGISTERED OWNER

SAME AS LEGAL OWNER BELOW

LEGAL OWNER

**RIDGE, LAWRENCE L
RIDGE, JUDY R
1213 16TH AVE
CLARKSTON WA 99403-2812**

SIGNATURE(S) OF REGISTERED OWNER(S) BELOW. HEREBY RELEASES ALL INTEREST IN VEHICLE DESCRIBED ABOVE.

BY _____ REGISTERED OWNER SIGNATURE DATE OF SALE _____

BY _____ REGISTERED OWNER SIGNATURE DATE OF SALE _____

SALE PRICE _____

SIGNATURE(S) OF LEGAL OWNER(S) BELOW. HEREBY RELEASES ALL INTEREST IN VEHICLE DESCRIBED ABOVE.

BY FIRST LEGAL OWNER-SIGNATURE & TITLE DATE RELEASED _____

BY _____ SECOND LEGAL OWNER-SIGNATURE & TITLE DATE RELEASED _____

LEGAL OWNER: When lien is satisfied, release interest by signing above and transmit this document to County Auditor or Agent with proper fee. Failure to properly release and transmit the Title within 10 days after lien is satisfied may result in monetary penalty to the debtor, pursuant to RCW 46.12.170.

TRANSFEREE/BUYER MUST APPLY FOR TRANSFER OF TITLE WITHIN 15 DAYS FROM DATE OF DELIVERY TO AVOID PENALTY. (SEE REVERSE FOR ADDITIONAL INFORMATION.)

10/96 TD-40-002 0013809 AR AB **KEEP IN SAFE PLACE**



Seller: Please DETACH HERE STATE OF WASHINGTON - DEPARTMENT OF LICENSING Seller: Please DETACH HERE

VEHICLE SELLER'S REPORT OF SALE

REQUIRED WHENEVER OWNERSHIP CHANGES - INCLUDING DEALER TRADES
WARNING: THIS FORM DOES NOT TRANSFER TITLE
PLEASE PRINT OR TYPE - SEE IMPORTANT INSTRUCTIONS ON REVERSE SIDE

LICENSE NUMBER %46134	MODEL YEAR 1969	MAKE MARLE	VEHICLE IDENTIFICATION NUMBER (VIN) H12260RKK80976	POWER-USE MOB	SERIES AND BODY STYLE 60SS/12	TITLE NUMBER 9633702504
TRANSFEROR/SELLER: To be released from civil/criminal liability for the operation of the vehicle you must fill in this form COMPLETELY. The completed form MUST be delivered to your local licensing agent, or mailed, as indicated, to the Department of Licensing, within 5 days from the date of delivery of the vehicle. The DOL mailing address is:			State of Washington Department of Licensing Licensing Section PO BOX 9038 OLYMPIA WA 98597-9038			
NAME OF SELLER (TRANSFEROR/PURCHASER/REGISTERED OWNER)			NAME OF PURCHASER/TRANSFEREE			
COMPLETE ADDRESS OF SELLER/TRANSFEROR			COMPLETE ADDRESS OF PURCHASER/TRANSFEREE			
CITY STATE ZIP CODE			CITY STATE ZIP CODE			
DATE OF SALE	TODAY'S DATE	VEHICLE PURCHASE PRICE	SELLER'S TITLE/REGISTRATION FEE <input checked="" type="checkbox"/>			

7-96 To find Department of Licensing has a policy of nondiscrimination. If you need special accommodations, please call (800) 812-0998 or TDD (360) 604-0200.

\$7574